



THE BLACK LUNG BENEFITS IMPROVEMENT ACT OF 2014

Overview

Coal workers' pneumoconiosis, commonly referred to as "black lung," is a debilitating and deadly disease caused by the long-term inhalation of coal dust in underground and surface coal mines. According to the National Institute for Occupational Safety and Health, the disease has caused or contributed to more than 76,000 deaths since 1968, including nearly 6,500 deaths between 2001 and 2010.

The *Federal Coal Mine Health and Safety Act of 1969*, which included the *Black Lung Benefits Act*, established health and safety standards to reduce miners' exposure to coal dust and created a program to provide compensation and medical care to miners who are totally disabled because of the disease. As a result of this law, the United States has seen a significant decline in the prevalence of black lung disease and has awarded billions of dollars in benefit payments to victims and their surviving family members.

Despite these successes, recent studies show that the prevalence and severity of black lung disease is on the rise. Investigations have also revealed that the Black Lung Benefits Program, which requires coal miners to engage in complex litigation against coal operators, unfairly burdens claimants and prevents them from accessing benefits. In 2009, the Government Accountability Office [found](#) that "coal miners face a number of challenges pursuing federal black lung claims, including finding legal representation and developing sound medical evidence to support their claims."

Recent award-winning investigations by the [Center for Public Integrity](#) and [ABC News](#) uncovered numerous cases in which coal operators and their attorneys defeated miners' claims by hiring doctors who systematically fail to diagnose black lung disease, or by withholding medical evidence from miners, surviving spouses, and judges that would have proven the miners' eligibility for benefits. These and other unethical practices were examined as part of a July 22, 2014, [hearing](#) before the Senate Subcommittee on Employment and Workplace Safety.

In the past year, the Department of Labor has taken several steps to address the issues identified in these reports and investigations, including: updating its regulations to reduce miners' exposure to coal dust; establishing a pilot program to help certain miners develop additional medical evidence in the claims process; and instructing district directors to disregard unreliable evidence from a doctor who, in more than 1,500 claims since the year 2000, failed to diagnose any miner with complicated black lung disease.

While important, administrative actions alone cannot solve the systematic problems facing victims of black lung disease. Congress has an obligation to protect coal miners' health and improve the black lung claims process.

Summary

The Black Lung Benefits Improvement Act of 2014 fulfills Congress' obligation to our nation's coal miners and their family members in several ways:

- Protects coal miners' health and promotes the fair adjudication of claims by requiring the parties to disclose all medical evidence developed in black lung cases. Under this provision, miners would be entitled to copies of doctors' diagnoses of their medical condition, regardless of whether or not the doctor will testify at trial.
- Provides miners with greater access to legal representation by creating a system to pay a portion of their attorneys' fees earlier in the litigation process. Under current law, attorneys who represent miners must often wait for several years—or longer—before receiving their fees from the coal operators who are liable for the miners' black lung benefits. This delay frequently acts as a disincentive to representation.
- Restores benefit increases for black lung beneficiaries and provides for automatic cost-of-living adjustments in the future. Because black lung benefits are currently tied to the rate of pay for federal employees, cost-of-living adjustments for miners and surviving family members were blocked or reduced as a result of federal employee pay freezes in 2011, 2012, 2013, and 2014.
- Prohibits unethical conduct by attorneys and doctors in the black lung claims process. This provision strengthens criminal penalties for making false statements in the claims process and grants Administrative Law Judges explicit authority to issue sanctions when a party withholds medical evidence from a claimant.
- Helps miners develop medical evidence in their black lung claims. This provision expands an existing Department of Labor pilot program to require that Secretary of Labor provide miners with expanded assessments of their pulmonary condition when it has been challenged by a coal operator.
- Improves the quality of medical evidence by requiring the Department of Labor to ensure that all of the doctors on its list of those approved to provide evaluations of miners' pulmonary conditions are properly qualified and free from conflicts of interest.
- Creates a one-year pilot program to provide impartial diagnoses of chest x-rays. Authorizes the National Institute for Occupational Safety and Health to establish panels made up of three physicians who are certified to classify x-rays to provide reports that can be used in claims proceedings as a service to claimant or operators on a fee-for-service basis. The pilot would be limited to claims involving the most severe form of black lung disease known as progressive massive fibrosis, where eligibility for benefits is presumptive and irrebuttable.
- Allows all claimants to request a re-adjudication of their claim if it was denied because of the testimony of a medical expert who has been discredited by the Secretary of Labor. This could impact as many as 1,500 claims since the year 2000.